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Ken K. Patel
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#4

Case AA315X
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May 14 2001
TECHNOLOGY CENTER 3100

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Application of :
GREGORY ASHTON, et al. :
Serial No.: 09/700,561 : Group Art Unit: 3762
Filed: November 16, 2000 : Examiner:
Confirmation No. :
For: DISPOSABLE ABSORBENT ARTICLE

REQUEST FOR CORRECTION OF FILING RECEIPT

Commissioner for Patents
Office of Initial Patent Examination
Customer Service Center
Washington, D.C. 20231

Dear Sir:

Applicants hereby request a corrected filing receipt. Attached is a copy of the Filing Receipt with the changes noted thereon. Specifically, there is an error in the Filing Date and the Title on the original Filing Receipt. Please make the following corrections:

Please omit "11/20/2000" and insert -- 11/16/2000 --.

Please omit "absorbant" and insert -- absorbent --.

Applicants submit that the error was not the fault of the Applicants. Accordingly, no fee is believed to be due.

Respectfully submitted,

FOR: Gregory Ashton, et al.

By

Ken Patel
Ken K. Patel
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May 22, 2001
Cincinnati, Ohio 45242
(FilingReceiptCorr.doc)
Last Revised 3/22/2001



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COMMISSIONER FOR PATENTS
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT. CLAIMS	IND. CLAIMS
09/700,561	11/20/2000 11/16/2000	3762	872	AA315X/KL	22	29	3

T David Reed
The Procter & Gamble Company
5299 Spring Grove Avenue
Cincinnati, OH 45217-1087

FILING RECEIPT



OC000000005782850

Date Mailed: 02/21/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Gregory Ashton, Cincinnati, OH ;
Craig Andrew Hawkins, Cincinnati, OH ;
Frederick Michael Langdon, Cincinnati, OH ;
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Fumito Furukawa, Cincinnati, OH ;

Continuing Data as Claimed by Applicant

THIS APPLICATION IS A 371 OF PCT/US99/11428 05/24/1999

Foreign Applications

If Required, Foreign Filing License Granted 02/20/2001

Title

absorbent
Disposable ~~absorbent~~ article

Preliminary Class

604

Data entry by : ORDENEZ, MARTA

Team : OIPE

Date: 02/21/2001



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Title 35, United States Code, Section 184
Title 37, Code of Federal Regulations, 5.11 & 5.15

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Bib Data Sheet

CONFIRMATION NO. 6013

SERIAL NUMBER 09/700,561	FILING DATE 11/20/2000 RULE	CLASS 604	GROUP ART UNIT 3761	ATTORNEY DOCKET NO. AA315X/KL
APPLICANTS Gregory Ashton, Cincinnati, OH; Craig Andrew Hawkins, Cincinnati, OH; Frederick Michael Langdon, Cincinnati, OH; Eiro Fukuda, Cincinnati, OH; Fumito Furukawa, Cincinnati, OH;				
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/US99/11428 05/24/1999				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/20/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY OH	SHEETS DRAWING 22	TOTAL CLAIMS 29
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 3		
ADDRESS T David Reed The Procter & Gamble Company 5299 Spring Grove Avenue Cincinnati, OH 45217-1087				
TITLE Disposable absorbent article				
FILING FEE RECEIVED 872	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____	